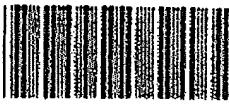


10-31-00 A

UTILITY PATENT APPLICATION TRANSMITTAL	
Submit an original and a duplicate for fee processing (Only for new nonprovisional applications under 37 CFR 1.53(b))	
ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231	Attorney Docket No. 99,858 First Named Inventor Ross G. Kaminsky Express Mail No. EL442911658US Total Pages
APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Transmittal Form with Fee 2. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 18] 3. <input checked="" type="checkbox"/> Drawings [Total Sheets 3] 4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed b. <input type="checkbox"/> Copy from prior application [Note Boxes 5 and 17 below] i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application 5. <input type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 6. <input type="checkbox"/> Microfiche Computer Program 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy c. <input type="checkbox"/> Statement verifying above copies	8. <input checked="" type="checkbox"/> Assignment Papers 9. <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS) <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized) 14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Enclosed <input type="checkbox"/> Statement filed in prior application; status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) 16. <input checked="" type="checkbox"/> Other: Recordation Form Cover Sheet
17. <input type="checkbox"/> This is a CONTINUING APPLICATION. Please note the following: a. <input type="checkbox"/> This is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application b. <input type="checkbox"/> Cancel in this application original claims _____ of the prior application before calculating the filing fee. c. <input type="checkbox"/> Amend the specification by inserting before the first line the sentence: This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of application Serial No. d. <input type="checkbox"/> The prior application is assigned of record to	

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09/699533
10/30/00

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 99-858	
APPLICATION FEES			
<input checked="" type="checkbox"/> BASIC FEE		\$ 710.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE
Total Claims	13 -20=		x \$18.00 \$
Independent Claims	2 - 3=		x \$80.00 \$
<input type="checkbox"/> Multiple Dependent Claims(s) if applicable			+\$270.00 \$
			Total of above calculations = \$ 710.00
			Reduction by 50% for filing by small entity = \$()
<input checked="" type="checkbox"/> Assignment fee if applicable		+ \$40.00	\$40.00
			TOTAL = \$ 750.00
18. <input type="checkbox"/> Please charge my Deposit Account No. 13-2490 in the amount of \$			
19. <input checked="" type="checkbox"/> A check in the amount of \$ 750.00 is enclosed.			
20. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 13-2490:			
a. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.16.			
b. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.17.			
c. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.18.			
21. <input checked="" type="checkbox"/> The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 13-2490 for any fee that may be due in connection with such a request for an extension of time.			
22. CERTIFICATE OF MAILING			
I hereby certify that I directed that the correspondence identified above be deposited with the United States Postal Service as "Express Mail Post Office to Addressee" under 37 CFR § 1.10 on the date indicated below and is addressed to the Asst. Commissioner for Patents, Box Patent Application, Washington, DC 20231.			
23. USPTO CUSTOMER NUMBER			
PATENT & TRADEMARK OFFICE			
			
020306			
24. CORRESPONDENCE ADDRESS			
Name	McDonnell Boehnen Hulbert & Berghoff		
Address			
City, State, Zip			
25. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Name Reg. No.	Matthew J. Sampson, Reg. No. 35,999		
Signature			
Date	October 30, 2000		